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CONFIRMATION NO. 4910

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/624,131	<b>FILING OR 371(c) DATE</b> 07/21/2000 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> 97,223-1	
<b>APPLICANTS</b> Ravi Kapur, Gibsonia, PA; Kenneth Giuliano, Pittsburgh, PA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/145,757 07/27/1999 and is a CIP of 09/540,862 03/31/2000 PAT 6,548,263 which is a CIP of 09/401,212 09/22/1999 ABN which is a CIP of 08/865,341 05/29/1997 PAT 6,103,479 This application 09/624,131 is a CIP of 09/513,783 02/25/2000 PAT 6,416,959					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 09/26/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 48	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 20306					
<b>TITLE</b> MINIATURIZED CELL ARRAY METHODS AND APPARATUS FOR CELL-BASED SCREENING					
<b>FILING FEE RECEIVED</b> 475	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		